

RNs: more are expected to remain in the workforce at older ages than has been true in the past. These trends raise serious planning issues for nurse employers. How can work processes and environments – especially in hospitals and nursing homes - be adapted or changed in order to retain as many of these older workers in direct care roles as possible? What are the consequences of losing a large portion of our most experienced nurses to retirement in a relatively short period of time? What can nurse employers do to ensure that clients and patients will not be adversely affected by these changes in the workforce?

Another demographic issue facing nursing workforce planners is the relatively low level of men and racial/ethnic minorities in the profession. Nationally, men comprised 6.1% of the RN workforce in the year 2004,¹ an increase of just 0.2% since 2000, and 1.7% since 1992. In North Carolina the proportion of men in the RN workforce has increased faster than the national trend: 2.8% over 1992 levels, a total of 6.3% in 2000 rising to 6.9% in 2006. In the LPN workforce, the proportion of men rose at about the same rate as in the RN workforce from 1987 to 1995, but leveled off and has not changed much in the past 10 years. The chart on page 7 reveals this trend. Constituting 4% of the LPN workforce in 1992, the proportion of men rose to 4.8% in 1996, 5.1% in 2000, and rose to 5.3% in 2006.

Achieving racial parity with the people they serve is an important issue in nursing, as it is in all health care professions. According to the 2000 census, approximately 28% of North Carolina's population is composed of people from racial minority groups.³ African Americans make up 21.6%, American Indians 1.2%, Asians 1.4%, other racial groups 2.3%, and those who report they are multiracial compose 1.3% of the state's population. Hispanics, who are an ethnic group comprised of all of the above-mentioned racial groups, account for 4.7% of the state's population, based on 2000 census counts. Our examination of the racial characteristics of nurses in the state shows that the LPN workforce has come close to achieving racial parity with the general population over the past two decades. Within the RN workforce, however, only 14.2% are people of color. The proportion has been increasing in recent years, but very slowly (see page 8).

Pages 9 and 10 explore this issue further by showing how various racial and ethnic minority groups within the RN and LPN workforces have changed over time. Blacks and Asians have been the fastest growing minority groups within the RN workforce. Proportionately, blacks grew from 7.3% in 1987 to 9.5% in 2006. Asian RNs made up just 0.2% in 1987, but grew to 2.2% of the total workforce by 2006 (see page 9). Blacks have consistently made up almost a quarter of the LPN workforce in our state for the past 20 years. In 2006, 24.4% of all LPNs in the workforce were black. Although their numbers are still quite small, both Hispanics and